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### USPTO FACSIMILE COVER SHEET

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To: Commissioner for Patents  
Fax Number: (571) 273-8300  
Date: February 6, 2006  
Pages: 13 pages (including this cover sheet)

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#### MESSAGE:

DETERMINING THE EFFECTIVENESS OF  
INTERNET ADVERTISING (as amended)  
Application No. 09/804,735  
Examiner Jean Janier  
Art Unit 3622

Amendment  
Amendment Transmittal

696.002

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Amendment Transmittal

FEB 06 2006

Atty. Docket No. 696.002

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of : Srinivasan et al.  
Serial No. : 09/804,735 Examiner : J. Janvier  
Filed : March 13, 2001 Group Art Unit : 3622  
For : DETERMINING THE EFFECTIVENESS OF INTERNET  
ADVERTISING (as amended)

HON. COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

1. ☐ Applicant requests an extension of time to respond to the outstanding Office Action. A Petition for an extension of time is enclosed.
- OR
2. ☒ In the event that an extension of time is required, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.
3. ☒ Applicants claim Small Entity status under 37 C.F.R. 1.27.

CERTIFICATE OF FACSIMILE TRANSMITTAL

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being facsimile transmitted on (571) 273-8300 on February 6, 2006 to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Stanley D. Ference III

(Type or print name of person transmitting paper or fee)

  
(Signature of person transmitting paper or fee)

Page 1 of 2

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Amendment Transmittal

Atty. Docket No. 696.005

**FEB 06 2006**

5. ☐ Also enclosed: \_\_\_\_\_
6. ☒ No additional filing fee is required.
7. ☒ The filing fee has been calculated as shown below:

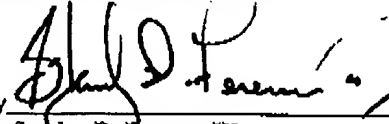
|  | Claims<br>Remaining<br>After<br>Amendment<br>(Col. 1) |   | Highest<br>No. Prev.<br>paid for<br>(Col. 2) |   | Present<br>Extra<br>(Col. 3) | SMALL ENTITY |              |   |   | OTHER THAN A<br>SMALL ENTITY |             |
|--|---|---|--|---|------------------------------|--------------|--------------|---|---|------------------------------|-------------|
|  |   |   |  |   |                              | RATE         | FEE          |   |   | RATE                         | FEE         |
| Total<br>Claims  | 13  | - | ** 20  | = | *                            | x \$25       | =            | O | x | \$50                         | = 0         |
| Ind.<br>Claims   | 2   | - | *** 3  | = | * 0                          | x \$100      | =            | O | x | \$200                        | = 0         |
| <input type="checkbox"/> Multiple Dependent Claim<br>Presented |   |   |  |   |                              | + \$180      | =            | O | + | \$360                        | =           |
|  |   |   |  |   |                              | <b>TOTAL</b> | <b>= \$0</b> | O |   | <b>TOTAL</b>                 | <b>= \$</b> |

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.  
 \*\* If the "Highest No. Prev. paid for" in this space is less than 20, write "20" in this space  
 \*\*\* If the "Highest No. Prev. paid for" in this space is less than 3, write "3" in this space.

8. ☐ Applicant encloses herewith a check for \$\_\_\_\_ to cover the filing fee.

Respectfully submitted,

FERENCE &amp; ASSOCIATES

By   
 Stanley D. Ference III  
 Reg. No. 33,879

Dated: February 6, 2006

Mailing Address:

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